



State of Rhode Island  
and Providence Plantations  
Office of the Secretary of State

A. Ralph Mollis, Secretary of State  
Corporations Division  
148 W. River Street  
Providence, RI 02904-2615  
401.222.3040

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009**

**Filing Period:** January 1 - March 1 • **Filing Fee:** \$50.00\* • **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.**

\* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 000009651		2. Name of Corporation MELDISCO K-M CRANSTON, R.I., INC.			
3. Street Address Principal Business Office 933 MACARTHUR BLVD.			City MAHWAH	State NJ	Zip 07430
4. Business Phone No. (201) 934-2000 x5		5. State of Incorporation RI			
6. Brief Description of the Character of Business Conducted in Rhode Island Shoes-Retail					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name JONATHAN COUCHMAN			Vice President Name		
Street Address 933 MACARTHUR BLVD.			Street Address		
City MAHWAH	State NJ	Zip 07430	City	State	Zip
Secretary Name JONATHAN COUCHMAN			Treasurer Name		
Street Address 933 MACARTHUR BLVD.			Street Address		
City MAHWAH	State NJ	Zip 07430	City	State	Zip
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name JONATHAN COUCHMAN			Director Name		
Street Address 933 MACARTHUR BLVD.			Street Address		
City MAHWAH	State NJ	Zip 07430	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/>		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			ISSUED SHARES — THIS SECTION <b>MUST</b> BE COMPLETED		
			Number of Shares	Class/Series	Par Value
			100	CNP	0

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

<b>FILED</b>	
File Date	JUN 10 2011
Check No.	
By:	By <u>[Signature]</u>
FOR SECRETARY OF STATE USE ONLY	

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

[Signature] 6/6/2011  
Signature Date  
JONATHAN COUCHMAN  
Print or Type Name  
PRESIDENT  
Title